

September 2001



School Health Connections

School Health Connections is an interdepartmental program between the California Department of Health Services and the California Department of Education dedicated to improving the health and academic success of children and youth. This is accomplished through a coordinated school health system that combines health education, health promotion, disease prevention and access to health-related services in an integrated manner.

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California Department of Health Services
714 P Street, Room 750
Sacramento, CA 95814
Tel (916) 653-7746
Fax (916) 653-2781

Outreach

in
Action

CONNECTING KIDS TO HEALTH CARE

TEN TIPS FOR A SUCCESSFUL EDUCATION PARTNERSHIP

Establishing partnerships and tapping into existing networks and collaboratives can enhance programs and projects that promote affordable health insurance outreach for families.

A community-school partnership can allow a beneficial exchange of ideas, expand financial resources and add staff.

Nationally, in little more than a decade, education partnerships have become an integral part of the educational process. Partners represent interests from corporations, community/non-profit organizations, military and health care agencies.

Critical to a successful partnership is an endorsement by the school district (superintendent and board of education), school (principal) and private sector (CEO or executive director) that partnership efforts are a major priority for all involved.

"We could not be as effective in the delivery of health services, prevention education and early intervention services without the support from the many partners in the San Diego community."

—Jack Campana, Director, Intervention Services Dept.
San Diego City Schools

HERE ARE TIPS FOR A SUCCESSFUL EDUCATION PARTNERSHIP

1 Make it a true partnership.

Clearly define how each partner will gain. The benefits may not be immediate but have future impact.

2 Sign on the dotted line.

Write an agreement as a sign of good faith. Agreements should contain four key components: mission statement, planned partnership activities, roles of key players and measurements of effectiveness.

3 Before recruiting partners, know what you want and what you have to offer. Determine the "real needs" within the school and community. Have tangible examples of how each partner might support joint efforts to address school/community needs.

4 Emphasize the importance of the partnership. Appoint or hire people to coordinate the program who will have strong commitment and accountability to the partnership. This tells the school district, school(s) and the community the importance of the joint venture.

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"Partnerships are committed to helping provide a world-class opportunity for every student.

The success of school/community partnerships embellishes this country's rich history of volunteerism."

—Thoughts from
San Diego City Schools
Partnerships in
Education



("TEN TIPS" Continued from page 1)

5 Think small for starters. Focus on two or three key activities. Be willing to modify or change your efforts if necessary.

6 Don't make money the focus of the partnership. Base your relationship on the utilization of the partner's in-kind time, talents and resources. If a business or community partner does agree to provide a financial donation, define the long- and short-term goals.

7 Clearly understand the culture and operation of your partner. For example, community partners need to be sensitive to the fact that primary concerns for schools are safety and confidentiality of students. Don't expect schools to "hand over" personal information about their students. Also, schools often operate on a more rigid time schedule. Be aware of sign-in/out procedures, use of equipment such as the copy machine and business/funding practices.

Partners should understand each other's organizational or corporate structure, policies and procedures. Don't be only an e-mail or phone partner. Getting to know each other's operation means meeting face-to-face and visiting each other's site.

8 "That's not what I said!" Poor communication is the number one reason partnerships do not work. Most communication venues (fliers, bulletin boards, phone trees, school/organization newsletters) have a person in charge. Get to know them.

Partners need to exchange directories and informational packets. A calendar of district/school activities is also helpful.

Communication should be timely and consistent. Many partnerships have committees that meet regularly to plan, implement and evaluate partnership efforts.



9 "How are we doing?" Follow-up and consistent updates are critical for everyone. Conduct regular evaluations of the effectiveness of the partnership.

10 "Let's party!" Celebrate partnership achievements. Showcase efforts through special receptions and/or displays. Share key partnership accomplishments with both the community and schools.

A special thanks to San Diego City Schools Partnership in Education (PIE) and the Consumers Union for their help in compiling this article.

For more information, contact San Diego City Schools (PIE) Program Manager Janet Delaney at (619) 725-5593 or visit www.sandi.net/partners.

Also available is "Healthy Kids Make Better Learners: A Guide to School-Based Enrollment in State-Sponsored Health Insurance Programs" at www.healthykidsproject.org or call Carolyn

ADDITIONAL PARTNERSHIP RESOURCES

National Association of Partners in Education (NAPE)
Phone: (703) 836-4880
<http://www.napehq.org>

California Association of Partners in Education (CPIE)
Los Angeles Unified School District
Phone: (213) 625-6989

U.S. Department of Education
Partnership for Family Involvement in Education
Phone: (202) 401-0056
<http://pfie.ed.gov>

National Alliance of Business
Phone: (202) 289-2888
<http://www.nab.com>

National Mentoring Partnership
Phone: (703) 224-2200
<http://www.mentoring.org>

The Business Roundtable
Phone: (202) 872-1260
<http://www.brtable.org>

U.S. Chamber of Commerce
Center for Workforce Preparation
Phone: (202) 463-5525
<http://www.uschamber.com>

National School-to-Work Office
Phone: (800) 251-7236
<http://www.stw.ed.gov>

FAMILY NIGHT: LEARNING TO USE HEALTH INSURANCE

Getting health insurance for the first time? Trying to figure out how to select a doctor? Wondering how mental health concerns fit it and where to go for a dentist?

Knowing that the ins-and-outs of a health insurance plan can be a daunting task, the Inland Agency, a private, non-profit community-based organization (CBO) located in the southern California city of Riverside, offers a solution—an innovative evening designed to guide parents through the maze of health insurance.

The Inland Agency, which serves more than 132,000 people in four counties, focuses on health promotion, youth violence prevention and community strengthening. The agency's Healthy Families/Medi-Cal for Children (HF/MCC) outreach staff initiated the formation of a collaborative, including two school districts and the Riverside Public Health Department, whose purpose is to enroll children in HF/MCC.

"We want to know what's working for families with regard to their children's health insurance needs, and what's not."

—Rosemarie Shine
Inland Agency

"We offer parents an opportunity to either come to one of our offices to enroll their child or to meet with us at the Back-to-School Night of their child's school" says Executive Director Linda Dunn. "We are flexible in working with schools to help families as they make the important decision to enroll their children."

Rosemarie Shine, one of 40 full-time staff employed by the Inland Agency, takes pride in knowing that Inland Agency's HF/MCC outreach program is a blessing for low- to moderate- income working families who want to know more about how to use their insurance plans.

(Continued on back page)

Santa Clara County's Healthy Kids is the first program in the nation that offers affordable health insurance to all qualifying children who don't meet the criteria for state and federal health insurance.

"That's regardless of their immigration status," clarifies Maritza Calvillo, co-chair of PACT—People Acting in Community Together, a faith-based coalition of 15 congregations representing some 30,000 families in Santa Clara County, located in the San Francisco Bay Area.

PACT teamed up with Working Partnerships USA, which is affiliated with the South Bay Area Labor Council, on a quest to provide affordable health insurance to the approximately 70,000 uninsured community children eligible for coverage. The result of their partnership effort was a huge community action meeting held in May 2000 at the Mexican Heritage Plaza in East San Jose. Nearly 500 community people attended. Elected city and county officials were asked to support the idea of offering affordable health insurance to all eligible Silicon Valley children.

"The community meeting put public elected officials on the spot. If those officials are going to say yes or no to health care for children, we wanted them to say it in front of a lot of people."

—Maritza Calvillo
PACT

At the community meeting, the labor union and faith-based partners asked for testimony from parents and teachers. "We were talking about the pain and frustration of children who do not have adequate health care. It was powerful," says Calvillo.

Calvillo's interest was very personal. "I was one of those kids they talked about. We were first generation Mexican, and my parents didn't have health insurance. My mother did home remedies. Mint leaves cured everything for her."

Calvillo works in the school system now and "still sees people just trying to get by. We live in Silicon Valley, one of the richest areas in the nation, and the disparity between the have and have-nots is growing. I feel everyone should have the right to health insurance."

Cambrian School District Board of Trustees Member Judy Chirco, who attended the meeting and whose district is in Santa Clara County, was "touched by the diversity of community people coming together in support of providing health coverage to children. There was faith and labor. There were educators. There were retired people, who in increasing numbers are becoming caretakers for their grandchildren."

Santa Clara County: Leader of the Pack

THE MEETING BRINGS ACTION!

The result of the meeting has been the use of city and county tobacco settlement money and Proposition 10 funding to set up Healthy Kids, a health insurance program covering children who are not eligible for the Healthy Families or Medi-Cal for Children coverage. The program is offered to qualifying undocumented children and children whose family income is up to three times the federal poverty level, such as a family of four that earns nearly \$52,000. "The cost of living in Santa Clara County is so high that many working families in this income bracket are without health insurance," says Chirco.

It is anticipated that future and on-going funding will come from private foundations, corporations and individuals. Efforts are also in place to conduct the fundraising necessary to obtain full, continuous funding for the program.

"Any partner that runs health centers on school campuses is in a prime position to conduct outreach for affordable health insurance and to enroll kids."

—Beth Copeland
The Health Trust

COALITION FORMED

The Santa Clara County Children's Health Initiative was formed to oversee and administer Healthy Kids. The initiative is a coalition of community-based organizations, government agencies and the Santa Clara Family Health Plan, selected to administer Healthy Kids.

The push to enroll children included hiring outreach and intake workers, media publicity, health fairs throughout the county, door-to-door campaigning and sign-ups in churches and schools.

Santa Clara County Children's Health Initiative Member Beth Copeland, who is affiliated with The Health Trust, a public charity operating eleven school health centers, feels school outreach is critical.

Hard work is paying off. Rosemary Barnes, Santa Clara Family Health Plan marketing director, says the plan is extremely successful. "In just eight months we've already signed up 18,000 uninsured children. The nice thing is that as we do outreach for Healthy Kids, we are also identifying many children who fit into the Healthy Families and Medi-Cal for Children categories."

There is a sense of excitement in Santa Clara County. "One of our goals is to help other communities learn how to do what we've done here," says Barnes.

What does she put at the top of her list in terms of must-dos to achieve that success?

Barnes doesn't hesitate to answer: "There must be buy-in from the top. There must be an extremely well-coordinated effort between school and community leaders."

For districts interested in becoming involved in this effort, call Rosemary Barnes at 408-260-4462.

("FAMILY NIGHT" Continued from page 2)

HOW DOES A HEALTH INSURANCE PLAN WORK?

The economically disadvantaged area that the Inland Agency serves contains a rich mix of ethnic groups, including many Latino families who are eligible for Healthy Families but have not yet enrolled their children. These families face barriers, such as differences in language and culture, lack of transportation and a distrust of government agencies. To address these barriers, Inland Agency outreach worker Christina Navoa, who is a bilingual/ bicultural Latina, developed Family Night to educate parents about how parents can utilize their children's newly acquired health insurance benefits.

Shine says that high enrollment figures are great, but they're just numbers if parents don't know how to use their insurance plan or don't renew their insurance. "This is an ongoing process. Parents of children who have not had insurance before are

cautious of utilizing their plan without guidance or assistance. We enroll many parents and they trust us. They feel comfortable coming to us for help."

Family Night is held at the Cesar Chavez Community Center in Eastside, but Inland Agency's vision is to eventually move Family Night to school sites where more people can participate. Family Night is a step in the right direction; the whole family is invited. Teens from People Reaching Out (PRO), one of the Agency's eight programs, provide child care.

PHOTOGRAPHS SAY IT ALL

There is a festive feel to Family Night. The evening begins with dinner followed by a meeting. Parents are encouraged to take Healthy Families and Medi-Cal for Children material with them to share with other families. Inland Agency is anxious to recruit parents who are interested in becoming Certified Application Assistants (CAAs) so they can help enroll other parents.

"During the meeting, we break into small groups, with some clusters conversing in Spanish, others in English. We encourage parents to talk about both their positive and negative experiences with their health insurance plan," says Shine.

"High enrollment figures are great, but they're just numbers if parents don't know how to use their insurance plan."

—Rosemarie Shine
Inland Agency

Parents are given the opportunity to ask questions and talk about their experiences with health insurance plans. Staff answers their questions, address their problems and describe such basic concepts as the difference between their health provider, the Healthy Families Program and the Inland Agency's Outreach Program.

"Family Night has helped us establish a relationship with parents," says Shine. "They are more willing to seek help from us and also refer their friends to us."

Shine feels that Family Night is an exciting and informative program for parents. Polaroid pictures of parents are taken and displayed on the bulletin board at the agency. "If anyone wonders how parents feel about Family Night, a picture is worth a thousand words," says Shine. "The parents' positive response and happiness shows on their faces."

For names of agencies or community-based organizations that have certified application assistants (CAA) who can help enroll children in either Healthy Families or Medi-Cal for Children, call 1-888-237-6248.



Gray Davis
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Secretary
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Diana M. Bontá, R.N., Dr. P.H.
Director
Department of
Health Services

SCHOOL HEALTH CONNECTIONS STAFF



Donna Gentile
Administrative Assistant

Nancy Gelbard, M.S.,
R.D. Chief

Anna Diaz, M.P.H.
School Outreach
Coordinator

Vivian Crocker
Office Technician

Cheewa James
Director of
Communications

SchoolHealthConnections

California Department of Health Services

714 P Street, Room 750, Sacramento, CA 95814

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HEALTHY FAMILIES & MEDI-CAL FOR FAMILIES

INSURING THE HEALTH OF OUR CHILDREN

Over 1.4 million uninsured children qualify for the Healthy Families program or Medi-Cal for Families. A joint mail-in application is available in 11 languages.

BENEFITS:

- Regular checkups (including well-child visits)
- Immunizations
- Prescription medicine
- Lab and x-rays
- Dental and eye care (including eyeglasses)
- Mental health and substance abuse services
- Physician and hospital services

ELIGIBILITY:

- Determined by family income and size, and by age of the child*
- Covers children from birth up to age 19
- Available to U.S. citizens, U.S. nationals and qualified immigrant children regardless of date of entry (a child may qualify for some form of Medi-Cal, regardless of immigration status)

**Children whose family income is up to 250% of the federal income guidelines may qualify for one of these programs. For a family of four, that translates to \$44,136/year (effective April 2001-March 2002).*



HEALTHY FAMILIES

- Low-cost coverage for children that do not qualify for Medi-Cal.
- Low monthly premiums from \$4 per child to a maximum of \$27 per family.
- No co-payment for preventive services such as immunizations.
- \$5 co-payment for non-preventive services such as going to the doctor due to illness.
- Choice of over 30 major insurance plans statewide that includes health, dental and vision.

MEDI-CAL FOR FAMILIES

- No-cost coverage.
- No monthly premiums.
- No co-payments for any benefit.
- Provides health, dental and vision care coverage.

OTHER OPTIONS FOR CHILDREN WHO DO NOT QUALIFY FOR HEALTHY FAMILIES OR MEDI-CAL FOR FAMILIES:

KAISER PERMANENTE CARES FOR KIDS* provides low-cost health care coverage for uninsured children who are not eligible for no-cost Medi-Cal for Families or Healthy Families. This program covers children under age 19 within Kaiser Permanente's California service area. For more information, call toll-free 1-800-255-5053.

CALIFORNIA KIDS* provides affordable preventive and primary health, dental, vision and behavioral health coverage for undocumented children. For more information, call 1-818-461-1400.

*Not affiliated with or endorsed by the State of California.
Eligibility is based on family size and income.

FOR MORE INFORMATION

1-888-747-1222



California
Department of
Health Services



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SchoolHealthConnections

CONGRATULATIONS TO HEALTHY FAMILIES/MEDI-CAL FOR FAMILIES SCHOOL OUTREACH CONTRACT AWARDEES 2001–2003

We at School Health Connections would like to congratulate all those agencies and their collaborators that were successful recipients for the 2001-2003 Healthy Families/Medi-Cal for Families school outreach funding.

Our thanks go to all 74 agencies that applied, recognizing that there was extensive time and energy committed to the process. We are excited to see the great interest in working with schools to increase the number of children, youth and families that have health care coverage in California!

AGENCY	COUNTY
Alisal Union School District (Healthy Start)	Monterey
Atwater Elementary School District	Merced
Bakersfield City School District	Kern
Berkeley, City of	Alameda
Butte County Office of Education	Butte
California Health Collaborative	Fresno
Ceres Healthy Start	Stanislaus
Corona-Norco Unified School District	Riverside
Glendale Unified School District	Los Angeles
Healthy Start of Huntington Park	Los Angeles
Lake Elsinore Unified School District	Riverside
Long Beach Unified School District	Los Angeles
Los Angeles Unified School District	Los Angeles
Mendocino, County of	Mendocino
MotherNet L.A./INMED	Los Angeles
Oakland Unified School District	Alameda
Oceanside Unified School District	San Diego
Ontario-Montclair School District	San Bernardino
Pasadena Public Health Department	Los Angeles
Sacramento, City of	Sacramento
San Diego City Schools	San Diego
San Diego, Regents of the UC	San Diego
Santa Ana Unified School District	Orange
Tahoe-Truckee Unified School District	Nevada
Valley Community Clinic	Los Angeles

Individualized Health and Support Plan (IHSP) Reimbursement Discontinued

As directed by the federal Centers for Medicare and Medicaid Services (CMS), California Department of Health Services (DHS) will discontinue payment of claims for IHSP-linked services through the Local Education Agency (LEA) billing option program effective June 30, 2001. CMS has determined that IHSP services are not covered by the federal Medicaid program and can not be claimed for reimbursement.

This means that effective July 1, 2001 LEAs will no longer be able to bill for:

- Targeted Case Management (TCM) or Transportation for students with an IHSP
- Treatment Services (Nursing/Therapy) in Managed Care Medi-Cal
- Counties for students with an IHSP
- More than 24 units of service annually to students with an IHSP

(Note: Services to students with an IEP or IFSP will still be billable.) Claims for services delivered prior to 6/30/01 will be processed. However LEAs should be encouraging their billing service to submit all IHSP claims as soon as possible.

